## 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000076388

Entity Name: AUTO BOUTIQUE COLLISION CENTER INC.

**Current Principal Place of Business:** 

109 SAN LORENZO AVE CORAL GABLES. FL 33146

**Current Mailing Address:** 

109 SAN LORENZO AVE CORAL GABLES, FL 33146

FEI Number: APPLIED FOR Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LORENZO-CASTRO, MADELIN 109 SAN LORENZO AVE CORAL GABLES, FL 33146 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MADELIN LORENZO-CASTRO 03/04/2014

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title P Title TREASURER

Name LORENZO-CASTRO, MADELIN Name LORENZO-FIGUEREDO, ROBERTO

Address 109 SAN LORENZO AVE Address 109 SAN LORENZO AVE

City-State-Zip: CORAL GABLES FL 33146 City-State-Zip: CG FL 33146

Title VP, SECRETARY

Name LORENZO-ORTA, GLORIDA
Address 109 SAN LORENZO AVE

City-State-Zip: CG FL 33146

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing Officer/Director Detail

FILED Mar 04, 2014

**Secretary of State** 

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